



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: ADVANCED AMBULATORY SURGERY CENTER, LLC

Street Address: 1101 Professional Blvd. Suite 104

City: Evansville

County: Vanderburgh

Administrator Name: Heather Cox

Administrator Email: heather.cox@aasc-evansville.com

ASC Web Address:

Fiscal Year: 2015

Accredited: Yes No

Name of Accrediting Body:

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

| | |
|---------------------------|---|
| Number of operating rooms | 2 |
| Number of procedure rooms | 0 |

III. Utilization Statistics

| A. Total Patients and Procedures | | |
|--|--------------------|----------------------|
| Time Period | Number of Patients | Number of Procedures |
| Persons Served in twelve-month period | 1851 | 1851 |
| B. Ten Most Frequent Surgical Procedures Performed | | |
| CPT Code | Total Procedures | |
| 64493 | 566 | |
| 27096 | 365 | |
| 64483 | 182 | |
| 64490 | 168 | |
| 62311 | 125 | |
| 64635 | 60 | |
| | | |

| | |
|-------|----|
| 63650 | 47 |
| 64479 | 44 |
| 62310 | 36 |
| 20610 | 20 |

IV. Outcomes from Surgical Procedures

| | |
|--|---|
| Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter. | 0 |
|--|---|